

FALCONS
Seattle Pacific Women's Volleyball
3307 Third Ave W, Ste 301
Seattle, WA 98119



2008

Falcon Volleyball Camp

**FOR GIRLS ENTERING
6TH - 12TH GRADE**



SEATTLE PACIFIC UNIVERSITY

CAMP DIRECTOR:



COACH CHRIS JOHNSON

Entering his fourth season as the SPU women's volleyball head coach, Coach Johnson continues to establish the Falcons as a competitive NCAA Division II program. In his second year as head coach, he guided the Falcons to a 24-3 overall record, including 16-0 in the GNAC. The Falcons earned their second straight automatic berth in the NCAA tournament as the conference champion, and Johnson received his second conference Coach of the Year award. The Falcons also achieved their highest ranking in program history, at #12 in the nation. The team finished the 2007 season with a record of 15-11. Coach Johnson's career record at SPU is 61-20. His camps are held in a positive, energetic, and fun environment, while focusing on developing the skill set necessary to play at a high level. Prior to becoming head coach, Johnson was the top assistant for the Falcons and earlier served as an assistant at Westmont College. A Bellevue native, he graduated in 2002 from Westmont and played a total of 5 years at the collegiate club level, including 3 at Westmont.

CONTACT US:

If you have any questions, please call the SPU Athletics Office at (206) 281-2085 or email Coach Johnson at vbchris@spu.edu.

For information on all of our summer camps (including registration forms), please visit: www.spufalcons.com and click on Summer Youth Camps.

CAMP OVERVIEW:

The Falcon Girls Volleyball Camp for high school and middle school girls will focus primarily on individual skill development with some team strategies and playing opportunities. Campers will be divided by age and ability to provide appropriate learning environments. The new positional camp, for students entering 9th-12th grades only, will focus on specific, in depth skills needed at each camper's position. Each camp will have 64 campers or less to maintain a low camper/coach ratio and allow for ample personal attention by our staff. Every camper will receive a camp T-shirt. Please see camp schedules to the right.



WHAT TO BRING:

- Energetic attitude
- Volleyball attire: shoes, knee pads, and appropriate workout clothes
- Ankle braces are recommended
- Water bottle
- Lunch for High School campers (lunch will not be provided)

CANCELLATION POLICY:

All cancellations made prior to the first day of camp will be refunded any amount paid above the \$50 non-refundable deposit. Medical cancellations will be fully refunded if the request includes a signed excuse from a physician. If a camper must leave the camp for medical reasons, a pro-rated amount will be returned. However, no refund will be given if a camper chooses to quit or is asked to leave for behavior issues.

CAMP SESSIONS:

HIGH SCHOOL CAMP (\$265)

Monday, July 28 - Thursday, July 31
9:00 am - 4:00pm all days.

For girls entering grades 9-12. All skill levels welcome.

Join us for our seventh year of individual skills development for players desiring to sharpen their abilities prior to high school try-outs. The camp will focus on fundamental skills training in an intense and challenging environment. There will also be numerous team-oriented activities and drills that will focus on the skill being taught.

NEW POSITIONAL CAMP!!! (\$100)

Monday, August 4 and Tuesday, August 5
1:00 pm - 4:00 pm both days

For advanced athletes entering grades 9-12.
(Attendance at High School camp is required)

This two-day camp will be divided by position, and include lots of reps and individual attention for each athlete, as well as advanced techniques, skills and discussion of each athlete's position. If you are a setter, outside hitter, middle blocker, or libero, there will be a court here for you! The focus of this camp is on individual repetition and improvement in all skills required at each position.

MIDDLE SCHOOL CAMP (\$70)

Monday, August 4 and Tuesday, August 5
9:00 am - 12:00 pm both days

For girls entering grades 6-8. All skill levels welcome.

Due to popular demand, we will be hosting a 2-day camp for athletes entering grades 6-8. The camp focus will be on fundamental instruction in attacking, passing, setting, blocking, serving, and defense. Emphasis will be placed on multiple-skill training and competition in a fun and energetic environment.

INSTRUCTIONS: Complete and return this form with tuition payment (or \$50 non-refundable deposit, with balance due on first day of camp). Please make checks payable to Seattle Pacific University. You may also call (206) 281-2085 to pay with a Visa or MasterCard (will incur a \$2 processing fee). This registration form and payment must both be received before confirmation will be sent.

MAIL TO: Falcon Volleyball Camp
Seattle Pacific University
3307 Third Ave W, Ste 301
Seattle, WA 98119

FAX TO: (206) 281-2266

CAMPER'S NAME _____ PHONE _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

SCHOOL ATTENDING _____ GRADE IN FALL 2008 _____

EMAIL _____ POSITION _____ AGE _____

T-SHIRT SIZE (*adult sizing; circle one*):

S M L XL

CAMP ATTENDING:

- HIGH SCHOOL MIDDLE SCHOOL
July 28 - 31 | \$265 August 4 - 5 | \$70
- POSITIONAL
August 4 - 5 | \$100

AMOUNT ENCLOSED \$ _____

PERMISSION STATEMENT: I certify that my child has had a doctor's physical exam in the last six months and that the results of the exam indicated that she is physically able to participate in the strenuous activity associated with a volleyball camp. I agree that the participant and I assume the risk for all injuries that may result from participation in the camp. I further understand that both minor and catastrophic sports injuries may occur through no fault of the coaching staff and that my child is covered by health insurance to cover these injuries.

I will accept the financial and legal responsibility for any injuries that may result from camp activities. I hereby authorize Seattle Pacific University as my agent to give consent to surgical and medical treatment for the participant if treatment is deemed necessary by the attending physician.

SIGNATURE OF PARENT OR GUARDIAN _____

EMERGENCY CONTACT _____ PHONE _____

CAMPER'S PHYSICIAN _____ PHONE _____

MEDICAL INSURANCE CARRIER _____ POLICY NO. _____